

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	212540035				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>DOMINION RESOURCES SERVICES, INC.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CT CORPORATION SYSTEM</b>  <b>4701 COX RD STE 301</b>  <b>GLEN ALLEN, VA 23060-6802</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>HENRICO COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>VA</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>10/31/2012</b></p> <p>SCC ID NO: <b>05288147</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000
CLASS	AUTHORIZED					
COMMON	1,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 120 TREDEGAR STREET</p> <p style="text-align: center;">CITY/ST/ZIP: RICHMOND, VA 23219</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;">           NAME:                      LESLIE N HARTZ            TITLE:                      PRESIDENT            ADDRESS:                      5000 DOMINION BOULEVARD            CITY/ST/ZIP/CO:              GLEN ALLEN, VA 23060         </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;">           OFFICER                      <input type="checkbox"/> DIRECTOR         </td> </tr> </table>			NAME:                      LESLIE N HARTZ TITLE:                      PRESIDENT ADDRESS:                      5000 DOMINION BOULEVARD CITY/ST/ZIP/CO:              GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR	
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NAME:	JAMES E ECK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	120 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	PAMELA F FAGGERT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5000 DOMINION BOULEVARD		
CITY/ST/ZIP/CO:	GLEN ALLEN, VA 23060		
NAME:	ROY S GRIER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	WILLIAM C HALL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	THOMAS E HAMLIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	DAVID C HOLDEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	140 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	SCOTT C MILLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	CHARLES E ROBERTS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR. VP		
ADDRESS:	140 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	ASHWINI SAWHNEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	701 EAST CARY STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	CHRISTINE M SCHWAB	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	THOMAS P WOHLFARTH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SHARON L BURR ASST CORP SEC 100 TREDEGAR ST RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK F MCGETTRICK EVP 100 TREDEGAR STREET RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KAREN W DOGGETT ASST CORP SECY 100 TREDEGAR STREET RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DAVID A HEACOCK CHIEF NUC OFFIC 5000 DOMINION BOULEVARD GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	G. SCOTT HETZER SVP TAX/TREASUR 100 TREDEGAR STREET RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARGARET E MCDERMID SVP/CHIEF INFOR 100 TREDEGAR STREET RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARTER M REID GENCOUN/CORPSEC 100 TREDEGAR STREET RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALMA W SHOWALTER CONTROLLER 701 EAST CARY STREET RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS F FARRELL II CHRMN OF BOARD 100 TREDEGAR STREET RICHMOND, VA 23219	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHELE L CARDIFF VICE PRESIDENT 120 TREDEGAR STREET RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ SHARON L BURR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SHARON L BURR, ASST CORP SEC PRINTED NAME AND CORPORATE TITLE	10/17/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			